Citi® Government Agency/Organization Program Coordinator Setup/Maintenance Form

Section I: Instructions

1.	To add, delete or change Agency/Organization Program Coordinator (A/OPC) information, the Agency/Organization Program Coordinator (A/OPC) completes Sections I through III and signs in Section IV.
2.	Indicate the **type** of request: ☐ CitiManager – Transaction Management ☐ CitiManager – Reporting Select one of the following: Select one of the following: ☐ Read ☐ Read ☐ Read/Write ☐ Read/Write
3.	Indicate the **action** you are requesting: ☐ Add to A/OPC info **(Complete entire form)** ☐ Change PC information (Complete Reporting Hierarchy and only the items requiring a change) ☐ Delete PC info ☐ Add as Alternate PC
4.	Maintain a copy in the Approving Official and Agency/Organization Program Coordinator's files.
5.	Fax completed form to your Client Account Specialist at 904-954-7700.

Section II: Agency/Organization Program Coordinator Information

The Agency/Organization shall identify below an Agency/Organization Program Coordinator (A/OPC). The Agency/Organization may also identify additional A/OPCs to handle account matters. A detailed description of the A/OPC's responsibilities may be found in the Agency/Organization Master Contract.

The Company and I understand that Citi will record telephone calls made to Program Coordinators (including myself) for quality assurance purposes.

(1)
_____
First Name of A/OPC **Middle** Initial **Last** Name (maximum 25 characters total)

(2)
_____
Business Address E-mail Address

_____
City State Zip Code Country

(3) _____ (4) _____ (5) _____
Business Phone Business Extension Fax Number Verification Information

Section III: Reporting Parameters

Agency/Organization Name: (6) _____

Reporting Hierarchy: (7) _____ _____ _____ _____
  Level 1 Level 2 Level 3 Level 4

  _____ _____ _____ _____
  Level 5 Level 6 Level 7 Level 8

Reporting Hierarchy: (8) _____ _____ _____ _____
  Level 1 Level 2 Level 3 Level 4

  _____ _____ _____ _____
  Level 5 Level 6 Level 7 Level 8

Citi Transaction Services

20090

Citi® Government Agency/Organization Program Coordinator Setup/Maintenance Form

Section IV: (8) Agency/Organization Program Coordinator Signature and Phone Number

Incoming Agency/Organization Program Coordinator's Signature _____ Date_____

Incoming Agency/Organization Program Coordinator's Name (printed)_____ _____Date_____

Incoming Agency/Organization Program Coordinator's Business Phone Number (with area or country code)_____

Incoming Agency/Organization Program Coordinator's Fax Number (with area code or country code) _____

Existing/Outgoing Agency/Organization Program Coordinator's Signature _____ Date_____

Existing/Outgoing Agency/Organization Program Coordinator's Name (printed)_____ Date_____

Existing/Outgoing Agency/Organization Program Coordinator's Business Phone Number (with area or country code) _____

Existing/Outgoing Agency/Organization Program Coordinator's Fax Number (with area code or country code _____

ALL fields must be completed prior to submission or the form will be returned to you.
Numbers in parentheses correspond to numbers on guide sheet on next page.

20090

Citi® Government Agency/Organization Program Coordinator Setup/Maintenance Form

Form used to add approved A/OPCs.

Section I: Instructions

Section II: A/OPC Information

1.	**Name of Agency/Organization Program Coordinator:** Program Coordinator's full name – First name, middle initial and last name (maximum 25 characters total).
2.	**Business Mailing Street Address:** Physical mailing address for the Program Coordinator.
3.	**Business Phone:** Area code and business phone number.
4.	**Fax Number:** Area code and fax number.
5.	**Verification Information:** A/OPC to provide identification password (i.e., a control number). This will be requested when the A/OPC contacts Citibank Customer Service for assistance.

Section III: Reporting Parameters

6.	**Agency/Organization Name:** Please provide complete name of agency/organization of A/OPC.
7.	**Reporting Hierarchy:** The five-digit reporting code assigned to each level within the organizational hierarchy that defines the Cardholder's relationship within your Agency's reporting structure. Up to eight, seven-digit codes may be assigned to your Agency. Contact your Client Account Manager for your Agency's specific codes.

Section IV: Terms and Conditions

8.	**Terms and Conditions:** For a **change** of Agency/Organization Program Coordinator, incoming and outgoing A/OPCs must sign the form and include their phone and fax number and the date the form is submitted. If you are **adding an alternate** A/OPC, the current A/OPC and the new, alternate A/OPC must sign the form and include their phone and fax number and the date the form is submitted.

20090